Office of Insurance Management



Benefit Focus

Idaho Department of Administration

June, 2002

EXERCISING YOUR MENTAL HEALTH

IBHP Offers Assistance to All Benefit-Eligible Employees

Stress. Relating to your kids.
Communicating with your spouse. Doing too much. Dealing with a difficult situation at work.
Changing childcare providers.
Helping your elder parents.

We all experience situations like these...and we all need solutions—quickly. For State of Idaho employees, the Integrated Behavioral Health Plan (IBHP) offers caring, professional assistance.

All benefit-eligible employees may use the Employee
Assistance Program (EAP), a resource and referral service.
A simple phone call can help you obtain information, identify community resources or connect you with short-term counseling help.

Employees enrolled in one of the State's medical plans also have longer-term counseling benefits ranging from psychological testing and family counseling, to substance abuse programs and psychiatric in-patient care.

Behavioral Health Plan Coverage for July 1, 2002 through June 30, 2003

The IBHP/EAP benefit premium cost is fully funded by the State of Idaho. The only cost to employees is when the benefit is accessed. In order to remain within the FY2003 appropriation, it has become necessary to make some adjustments to the IBHP.

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	PRE-AUTHORIZED IN-NETWORK COST PER HOUR	PRE-AUTHORIZED OUT-OF-NETWORK COST PER HOUR
Maximum Annual Benefit	Up to 200 hours for in-network and out-of-network care	
Annual Deductible	\$150/member \$300/family Applies to all pre-authorized IBHP care <i>except</i> the EAP	
EAP Benefits	Up to five visits at no cost per plan year (<i>Pre-authorization required</i>)	Not applicable
Outpatient Individual Care and Services: Psychiatric evaluation and medication management (minimum \$20 co-pay/visit) Psychological testing and services Professional counseling Family and group counseling	Member pays \$20 co-pay/hour Note: Co-pay becomes effective after deductible is met	Plan pays 50% per hour of usual and customary charges
Facility-Based Care and Services: Acute inpatient psychiatric Inpatient substance abuse program Partial or day hospitalization Intensive outpatient programs	Member pays \$10 co-pay/hour Note: Co-pay becomes effective after deductible is met	Plan pays 50% per hour of usual and customary charges

What has not changed?

Members will continue to have access for up to 5 EAP visits during the year at no cost to the employee or dependent.

All enrolled members will continue to have up to 200 hours of IBHP services provided during the plan year.

All care, whether In-Network or Out-of-Network, and including EAP visits, must be preauthorized by BPA in order to be covered by the plan.

What has changed?

Employees accessing the IBHP benefit will be required to meet a deductible of \$150 per member (maximum \$300 per family).

After the deductible is met, a co-pay will continue to be assessed for each In-Network visit:

- \$20 per hour for Outpatient care
- \$10 per hour for Inpatient and Intensive Outpatient care

Following the deductible, the plan will continue to pay 50% of Usual, Customary and Reasonable (UCR) charges for Out-of-Network care.

Plan Re-Marketing Assures Efficiency and Service Quality

The IBHP began in 2000, and for the past two years has helped employees meet the challenges in their lives. After careful competitive analysis and review, the State has contracted with **BPA Health Inc.** to administer this program again for the FY2003 Plan Year.

Every year, the **Office of Insurance Management – Department of Administration** assesses all its benefit programs for quality of services provided to employees, the accessibility of Providers' networks, and their financial stability.

Pre-Approval Requirement

All care must be pre-approved in order to be covered. You can obtain pre-approval by calling BPA anytime.

To pre-approve your mental health, substance abuse and EAP benefits call the **Business Psychology Associates 24-Hour Hotline: 1-877-427-2327 (toll-free).**

If you are a Treasure Valley resident, please call **BPA at 343-4180** during regular business hours and use the hotline at all other times.

When you call BPA, an associate will talk with you about your specific situation to:

- Help determine an appropriate level of care
- Help you choose a provider most suited to your needs
- Verify medical necessity
- Authorize the care

Who Is Eligible For Benefits?

Employees and dependents enrolled in one of the State's medical plans are eligible for up to 200 hours of mental health and substance abuse benefits and five (5) EAP visits per plan year.

All benefit-eligible employees and their dependents, not enrolled in one of the State's medical plans, are only eligible for the EAP benefits.

Ihis publication presents general benefit information. In the event of any conflict between the information in this publication and the Plan provisions, the Plan documents and insurance contracts will govern.



